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DR. MARSHALL HALL ON PUERPERAL DISEASES.

[Concluded from page 410.]

In the *third* place, I wish to draw your attention to the influence of *previous disorders* upon the state of the patient after delivery.

This is a most important and interesting question, and it has two bearings: the first, upon the parent herself; the second, through the medium of the milk, upon the infant. I chiefly allude, in this place, to those forms of disorder of the general health of which I have already attempted a description.

Such a state of disorder, especially if long continued, and attended by much pallor or pale icterode hue, involves in itself a state approaching to that of loss of blood; and it has been sufficiently shown that this form of general disorder itself depends upon a deranged state of the functions of the intestinal canal and of the other digestive organs, so that it is obvious that such a condition, before confinement, predisposes to the effects of intestinal irritation and of exhaustion.

I need not remark how important it is, in such cases, to devote an especial attention to the restoration of a healthy state of the system. The state of the bowels should be watched daily, a mild but invigorating diet should be enjoined, and the tonic effect of gentle exercise in the open air should be secured during the whole period of pregnancy, for conception is not generally prevented by this state of disorder of the general health.

In extreme cases the bowels become exceedingly loaded, and there is a state of the system approaching to bloodlessness. In neglected cases of this description death has quickly and unexpectedly ensued from a far less shock than that of parturition. In other cases a series of painful symptoms has ensued, which have perhaps exhausted the patient finally, though more slowly; of this the following is a most interesting example:—

Mrs ——, aged 28, had long had all the symptoms of disorder of the general health, with a pale icterode hue of the complexion. For some time before her confinement she suffered from aphthæ, with irritability of the stomach and bowels, and there was some œdema of the ankles and of the face.

After delivery there was a considerable flow of lochia; the tendency to diarrhœa continued, with light yellow fœtid stools, and the pulse was

frequent; the countenance was extremely pale, [illegible] there were great pain of the head, fluttering and tendency to faintishness.

Soon after delivery the aphthæ, which had somewhat disappeared, were again observed on the inner part of the under lip, in the form of vesicles clustered together, and one or two were situated on the tongue, which was clean and pallid; the face was pale; the prolabia exanguinous; there was repeated bleeding from the nose, the blood becoming pale and aqueous; there was frequent pain of the head; the pulse was frequent, often 110; the bowels loose. She was much relieved by taking tinctura opii, pure opium, the pilula hydrargyri, &c.

On the 24th of May, 1819, twenty days after delivery, and after a gradual amendment for a fortnight, she experienced in the night a fit of palpitation of the heart, which, however, soon went off.

On the 26th Mrs. —— had taken a little mutton, and her room was particularly close; under these circumstances she became affected with great anxiety and agitation, an overwhelming internal feeling not to be described, and tendency to fainting, all increased on attempting to be moved; the pulse was small, and 156; the heart, carotids, and, indeed, the head, chest and bed-clothes were affected with throbbing and palpitation. Thirty drops of the tinctura opii were given, and repeated with great relief.

The next day, the 27th, the pulse continued at 132, and the movement of the heart, carotids, head, chest and bed-clothes, was still great; the pulse was fuller, the general expression and feelings more tranquil; there had been some sleep, but on awaking there was a temporary confusion of mind; the bowels had been gently moved by the Rochelle salt.

On May the 30th the symptoms remained nearly the same. The pulse 140; the beating of the carotids still visible; the palpitation greatly increased, and faintishness induced on moving; the countenance was pale, and rather tumid; the tongue and teeth appeared as if besmeared with syrup, and the breath had the odor of new milk; the bowels were confined; the urine plentiful; no tenderness of the abdomen, cough, or headache, or tendency to complain.

May 31st. A mild purgative and an enema were administered yesterday, and evacuated large portions of hardened fæces, after which a draught with thirty drops of tinctura opii was given. The pulse fell to 100; and all the symptoms were mitigated. In the evening the pulse was about 104, there was still a little throbbing of the head, but the palpitation and beating of the carotids were much diminished; the bowels unmoved to-day; urine plentiful; fluent catamenia. No pain or tenderness of the abdomen.

June the 3d. Since the last report there have been repeated attacks of sickness and vomiting, with more throbbing of the head, carotids and heart; and the alvine evacuation has been occasionally costive. To-day the countenance is pallid, and more swollen, with œdema; there is throbbing at the occiput, with pain, and beating of the heart and carotids; a degree of labor in the breathing, and cough; tenderness of the epigastrium, sickness and constipation. The manner appears rather

changed; speaking requires greater effort; there are greater hurry and exhaustion, and greater repugnance to food and medicine.

June the 7th. Since the 3d the principal symptoms have been sickness and vomiting, medicine having been quite rejected, and sometimes food. There have been once or twice deep breathing, and a sort of blowing, apparently implying a sense of want of air; there is an occasional hacking cough; some throbbing of the head; the pulse has been from 100 to 110. The countenance is pale, but the lips have a little more color. There is much loss of flesh. The bowels have been kept open; the appetite is better. There has been good sleep.

June the 8th. The countenance is much as before; there is less throbbing in the head; no delirium; pulse 108 and rather irregular; some sighing and deep breathing, hacking cough, sickness and vomiting; some tenderness of the right hypochondrium, and beating of the abdominal aorta.

June the 9th. Less throbbing of the head; pulse 116; much pulsation over the aorta; the sickness has recurred several times.

June the 10th. This evening there is increased sickness, with dyspnœa, consisting of deep, sighing breathing; pulse 120; the throbbing palpitation and pulsation of the abdominal aorta are less; no cough noticed; the sickness continues; bowels open twice.

June the 11th. The deep breathing has been very urgent. The nose is cold and livid; the lips dry; the eyes deathly; the pulse 100 and feeble. Mrs. —— expired on the 12th, about 2, P. M.

On examination, on the 13th at noon, three or four ounces of water were found in each cavity of the pleura, and one ounce in the pericardium. In every other respect the thoracic and abdominal viscera were most healthy. The heart, the stomach, the bowels and the liver, were free from the slightest appearance of disease. The uterus was collapsed to its natural size.

This case may be taken, instar omnium. In many others, such an event has been prevented by a timely and appropriate attention to restore the general health.

It may happen that the patient was not known to the physician before the period of her confinement. It will then be found important to have studied the external characters of disorder of the general health, and especially the appearances of the complexion, and of the tongue, the state of the alvine evacuations, &c.; and much will, of course, be ascertained by a careful inquiry into the history of the case.

It is of the utmost importance to conjoin aperients with a cordial and nutritious kind of diet. For I am persuaded that the strength is far more apt to fail in these cases than is generally imagined, and especially in that variety which is attended by extreme pallor, which, in fact, denotes a state approaching to bloodlessness and exhaustion.

The next point to be mentioned is the influence of a morbid condition of the general health upon the secretion of the milk, and upon the health of the infant. It has frequently occurred to me to lament that patients have given up all hope of ever being allowed to nurse, from the sad consequences produced upon the infant. This circumstance gene-

rally depends upon disorder of the general health of a protracted kind; and it is obviated by proper and persevering efforts to restore the functions to their natural state.

It may be necessary for the infant to be fed or to have another nurse, if these precautions were not enforced before the approach of confinement; for time is required to subdue the disorder, and change the secretions. But if there be space for effecting the due changes, the plans which have been already recommended for restoring the general health of the parent will always succeed in enabling her to nurse without disordering her infant.

I now conclude my observations on puerperal diseases—the most anxious of all cases. What I have stated I have learnt in actual practice. Treasure up the remarks I have made, and try their force and truth when you enter into practice for yourselves, and to each of you allow me to express the sentiment contained in these well-known lines,

"Si quid novisti rectius istis,
Candidus imperti, si non his utere mecum."

AMPUTATION AT THE SHOULDER JOINT.

The following case is numbered 2152, in the fourth quarterly report of the Ophthalmic Hospital at Canton.

Absorption of the os humeri and enlargement of the arm. Po Ashing, aged 23, entered the hospital on the 3d of November. Six years since, he fell from a house and broke the humerus of the left arm, half way from the elbow to the shoulder, the lower shoulder passing upwards and backwards. Union so far took place as to render the arm serviceable, till six months since, in a crowd at a 'sing song,' it was again broken. From that time, according to his statement, the arm gradually became larger till it had attained its present enormous size. Besides being painful, the weight of it drew him quite one side; at several places it seemed ready to burst; the skin was bright and glistening, and the veins passing over it were numerous and much enlarged. There was no doubt of its containing fluid, and though no pulsation could be felt, apprehensions were entertained that the tumor might be of an aneurismal nature. November 14th, assisted by Messrs. Cox, Cullen, Jardine, and Bonsall, I punctured the arm, supposing that possibly it might contain pus, and that the necessity of amputation might be avoided; yet prepared, if disappointed in this, to remove the arm. On opening the abscess, a dark-greenish fluid escaped, with considerable force, but soon became darker and more bloody. Sixteen ounces were first discharged, but the character of the fluid was not decisive. In the hope that the blood was from some small vein divided by the incision, and that there was deep-seated pus, the lancet was re-entered nearly its whole length; but the same discharge continued with a greater proportion of venous blood: thirty-two ounces, in all, were discharged, and the aperture closed. All were agreed that the only

chance of life was in the removal of the arm; but the exhaustion of the patient and absence of his father induced us to postpone the operation till the next day, unless subsequent symptoms forbade. At 3 o'clock, P. M., it appeared that the tumor, which had been diminished by opening it, had attained more than its former size, and supposing that the vein which had been opened was emptying itself into the tumor, and that there could be no safe delay, the operation would have been performed immediately but for the absence of the patient's friends. The next morning (November 15th), the circumference was still but thirty inches; the integument having reached its maximum of distention, it appeared as though the fluid was insinuating itself beneath the integument about the shoulder joint, increasing the difficulty and hazard of the amputation. It proved, however, to be mere tumefaction. The father and friends of the patient had come, and given the agreement usual in cases liable to fatal terminations; and the patient had recovered very much from his previous exhaustion.

At 11, A. M., the gentlemen present the preceding day were ready, and all things were prepared for the amputation. The patient was seated in a chair supported around the waist by a sheet; the tourniquet was applied, also the subclavian artery secured by an assistant; a single flap was formed, as recommended by Liston, the extent of the disease not admitting the use of the catlin as practised by Cooper. With a large scalpel, two incisions were made commencing on either side of the acromion process, and meeting at the origin of the deltoid muscle, which was immediately dissected up; the capsular ligament divided, the head of the humerus turned out of the socket, and another stroke of the knife upwards dissevered the arm from the body. A gush of blood pointed out the axillary artery, which was readily secured. The time did not exceed a minute from the application of the scalpel till the arm was laid upon the floor; the patient was then put upon a bed, and the pressure upon the artery removed. An excellent flap was formed, and dressings were applied as usual. Afterwards the patient threw up the brandy and water and other medicines.

The best representation of the arm after amputation, so far as shape is concerned, is that of a large ham of bacon. It weighed sixteen catties, equal to 21½ pounds. Opening the arm at the place where it was punctured the preceding day, a dark coffee-colored fluid gushed out. There were eight or ten ounces of coagulated blood in the cavity first opened, which was bounded by a cyst that formed the walls of others. It resembled serous membrane. Opening other cavities, there was a similar discharge and a quantity of matter resembling putrid crassamentum, of a light and purplish color, or like the disorganized lungs of persons who have died of pulmonary consumption. Some of the cysts contained nearly half a pint of fluid, &c. Traced the brachial artery from the axilla to the forearm, and also the veins. The artery was very small, about one tenth of an inch in diameter, and its coats thin; veins also small. The radial nerve was considerably enlarged. The bone was *entirely absorbed*, except an inch of each extremity. From these small portions a few spicula of bones projected. At the head of

the humerus it appeared, till we discovered the absorption of the whole bone, as if nature had formed a new joint with the glenoid cavity within the head of the humerus. There were points of osseous matter, but the cysts collectively were surrounded on the inside and back of the arm by a firm cartilaginous wall like the brisket of an ox, with tendinous fibres passing in every direction like the curly maple. The muscles were much diseased, and their tendons lost in the mass of cartilage, which, near the elbow, was three or four inches in thickness. From the elbow downward, the muscles were perfect. The forearm was œdematous, and considerable adipose substance was found under the integument. All who were present pronounced the case the most remarkable they had ever seen. The patient is the first Chinese, so far as I know, who has ever voluntarily submitted to the amputation of a limb.

At 5 o'clock, P. M., the patient having awoke from sleep, asked what he might eat. Congee was given. The expression of his countenance was good; he spoke with a natural voice, complained of cold, though his body was of a good temperature, the skin feeling natural, with a gentle perspiration upon the forehead. Not much oozing from the wound, but little pain, and he was quiet; his pulse was 126. With a friend, Mr. H., I watched all night with the patient. At 1 o'clock next morning he wished to know if he might eat chicken. He occasionally started in his sleep, and when awake, spoke of his arm as if it were still on. From four till five o'clock, he slept quietly, and made no complaint of pain, though there were some febrile symptoms, and his tongue was white and the skin dry. At six o'clock sponged his body, and gave an ounce of castor oil. Pulse from 4 o'clock, 110; bowels were moved during the day, and all the symptoms became more favorable. On the 18th, the wound was dressed and found to be united, by the first intention, nearly the whole length of the incisions. Most of the sutures were removed. On the 21st, the dressings were changed again, and the remaining sutures slipped, and the wound had the most healthy appearance. Patient walks his room, his general health is good, and his strength fast restoring. His gratitude, and that of his father, seem deep and sincere.

MEDICAL ESSAYS.—NO. IV.

[Communicated for the Boston Medical and Surgical Journal.]

"EXTREMES ARE DANGEROUS."

Of the extremes to be avoided, we will now mention *the miasms of vegetable and animal matter*. Our object, more particularly, will be to point out the means of avoiding the *marsh poison*. Much has been written and said upon the nature of this poison and the way it first attacks the system, but it seems to very little purpose. Some seem to imagine, or believe, that if they could ascertain exactly the nature of this enemy, they could obtain an easy victory over him. But the details of every new experiment upon the nature of this poison serve only to confirm us in the belief, that it is impossible to obtain it in a separate

state, or detach it from its affinities, so as to examine it singly and satisfactorily; and it will in all probability elude forever the researches of the most careful and the most scrutinizing. It may be said to evaporate, expand, or fly off in the process, or combine by affinity with some peculiar associate, so as to assume a very different character. Its resemblance to other poisonous gases, we know only from its effects; but this is all we need to know, in order to guard against it.

Malaria are the product of animal and vegetable putrefaction or decomposition. "That all vegetables," says a late writer, "contain water, will not be denied; and that all water contains animals, may be proved by the hydro-oxygen microscope. There is no putrefaction without water, and therefore none in which animals are not involved." "One sixth of the driest and hardest wood," says Dr. Good, "is water." We are disposed, however, to commit this subject to the wire-drawing genius of a professor at the West,* and to some others inferior to him in point of talent, whilst we go on to apprise the reader of those precautions which he would do well to take against this enemy.

Habits of uncleanliness are to be avoided. Nothing is more reasonable than to suppose that a habit of uncleanliness will prepare the system for the reception of marsh poison, as well as render it liable to many other diseases.† The pores of the skin in any part of the body (although the amount of perspiration in every part is not the same) will not endure to be checked with safety, and especially if it be done habitually. The capillaries of the skin being disturbed or disordered to any considerable extent, it is easy to conceive of the disorder being propagated to some vital organ. There seems, for instance, to be a peculiar sympathy existing between the liver and the skin; and it is admitted by most persons who treat upon the subject, that the marsh poison may enter the pores of the skin and thus affect the liver. It is also thought that it may reach the nerves, as well as the inner surface of the lungs.

It is not our design to occupy much of the reader's attention with remarks upon the importance or necessity of frequent ablutions in warm climates and in the warmer months, nor shall we think it necessary to insist much upon the virtues of the cold or the warm bath; whilst we would caution him particularly against the use of any apparel that promotes the accumulation of filth in the pores of the skin, and also against the tendency of certain mechanical trades which are often accompanied with an accumulation of filth. The wearing of flannel, unless it be frequently changed (although it must always be put on perfectly dry), may inflict a greater and more extensive injury, than its entire disuse. Flannel absorbs and retains the matter of perspiration in a state far less injurious than linen; but without being frequently

* We allude to Dr. Caldwell's notion of dissolution, as differing from the decomposition of vegetable matter, and also to a controversy which he promoted for some time in relation to the introduction of foreign substances into the circulation.

† "A scrupulous attention to cleanliness," says an English Journal, "is among the surest means of restoring health to those who are sick, and securing it to those who are well." "A Frenchman in the middling ranks of life," says one, "often puts on a dirty shirt over a clean skin; but an Englishman, of the same condition, still oftener puts on a clean shirt over a dirty skin." As sarcastic as this may appear, we are disposed to apply the same remark to nine tenths of the laboring class in our own country, and to this source we attribute the prevalence of many complaints among them.

changed, such an accumulation takes place as is likely to block up or lock up the very doors of the skin. It is foreign to our design to make out a moral lecture upon clothing, and yet we are constrained to drop a hint or two on economy in dress. We are bound to confess, however, that we believe it strictly economical and healthful for both sexes to clothe themselves with that apparel which the seasons dictate, and the circumstances of people will admit. We are also disposed to think that the peculiar texture of cloth that is worn, is not a matter of so much consequence, as it is to avoid the frequent and sudden changing of apparel, and the practice of wearing too much or too little. Many of our amiable country-women, it is believed, have experienced an entire overthrow of good health and a good constitution, and we had almost said a good character, by adopting the thin dress of fashion, and then venturing upon the midnight air. On the other hand, many a young man of promise among us has incurred an unfortunate delicacy of health by the mere circumstance of occasionally wearing too much clothing. We are sensible that habit has great influence, but we think that experience has long since dictated an invariable rule for the colder season, and that is, for every one to make use of just what clothing is necessary in order to be *comfortably warm.* No one in his senses would be apt to wear too much apparel in the hot season. Cold is the insidious enemy that all should guard against; and we need only repeat, that the hands and feet should be carefully protected from its influence. It is by way of this enemy to health, that wet clothes are so injurious. In respect to this matter, however, some have gone so far as to oppose the practice of immediately throwing them off, and yet we are of the opinion the sooner it is done the better, provided an adequate quantity of dry clothing is assumed in its stead.

Returning to the subject with which we commenced in this essay, we would observe that the marsh poison may be guarded against in a good degree by the following precautions; to wit, *withdraw immediately from the sickly region, if possible—uniformly live and sleep in upper rooms, well ventilated, during the sickly season—avoid the night air—drain and cultivate marshy grounds—and take care to leave every tree intervening between the marsh and the dwelling house, unmolested.* During the fatal fever that prevailed in Natchez in 1822, when not more than two hundred souls could be found (in a city characterized, at that time, by a population of four thousand), and they upon the skirts, one family remained in the city and escaped the disease. In answer to the question whether any precautions were taken by the family, it was said, that they *all lived and slept in an upper room.* The night air, in cities and towns with a dense population, is peculiarly poisonous.

We shall now conclude this essay, by briefly remarking upon the evil of indulging in low spirits and melancholy. This is an extreme that may be spoken of as not being subject to the control of every one, owing, as it is thought, to some constitutional defect. It may arise, however, from a mere want of resolution, and a culpable proneness to look only at the dark side of things. Disease, it is true, may so far enfeeble the system, as to destroy all resolution, and banish the virtue of firmness

entirely. But it is surprising to see how much can be done to alleviate or modify this peculiar state of mind. The kind offices of a friend, a nurse, or a physician, will do much towards dissipating the evil. The advice and the efforts of the excellent Rush (in which we were personally concerned) is fresh in our remembrance. Whilst lying under the power of a most depressing fever, he advised and urged us to do our utmost to *keep up our spirits*, and not yield to our situation. It was his practice, at every visit, to relate some interesting anecdote, with a view to strengthen his advice. The effect upon the mind was so great or so absorbing, that we have more than once been compelled to say, that his endeavors in that line were of more service than his medicine. Kindness and complacency are virtues of a superior cast, and can never fail to produce the happiest effects upon all, whether well or ill. The low-spirited invalid, the melancholic misanthrope, and the insane, demand nothing so much at our hands as proper attentions and constant kindness. The man who would rudely jeer or insult either of these characters, deserves neither to be trusted, nor to be tolerated in good society. We shall not enter into a detail of the various methods of alleviating the depression of a sick man, as it is certain that a judicious friend will adopt none but judicious means, and only such as circumstances afford. "In favor of the influence of music upon melancholy or low spirits," says one, "we have the testimony of all antiquity, along with the effect produced upon the gloomy distemper of the perverse mind of *Saul*." But it is not every kind of music, vocal or instrumental, that will produce the desired effect, nor will music of any kind prevail at all times and in all seasons.

NEW HAVEN MEDICAL ASSOCIATION.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—In the 19th No. of the "Boston Medical and Surgical Journal," you have a notice of the compliment paid Drs. Jackson and Warren, in which reference is made to the Boston Medical Association as having been the cause of "unparalelled harmony, good will, charity," &c., among the members of the profession, and also to the lengthened time of its continuance. For the "New Haven Medical Association," I must claim a greater age and not less harmony, good will, mutual aid, confidence and forbearance. If you think best to publish the following statement, as another evidence of the benefits of such associations, it is at your service. Respectfully yours, &c. B.

New Haven, Ct., Jan., 1839.

Previous to the formation of the New Haven Medical Association, the physicians of the town were in habits of occasional social meetings, without a constitution, or written professional laws. In 1784 they originated the "Medical Society of New Haven County," which is now merged in the Connecticut Med. Society, "plighting to each other our honor for the strict observance of all such regulations as may be adopted by the majority of said Society, formed for the following important pur-

poses, viz.: 1st. To lay a proper foundation for that unanimity and friendship, which are essential to the dignity and usefulness of the profession." To communicate discoveries, to make accurate observations on the climate, diseases, &c. &c.

The New Haven Medical Association was formed in January, 1803, by ten physicians then practising in the town, by the adoption of a constitution and code of laws, and has continued in existence to the present time. Every practitioner of respectability, on settling in the town since its formation, has become a member, and continued attachment to the institution has been almost universal.

Two of the first members of the Association still survive, viz., Drs. Eli Ives and John Skinner. Of the eminent men who have favored the association with their attachment and attendance, so long as health or life continued, may be mentioned Dr. Æneas Monson, Dr. Levi Ives, Dr. Nathan Smith, and Dr. Thomas Hubbard. Indeed the last was regular at the meetings during the last year of his life, when prevented, by infirmity, from attending to his ordinary professional business.

The meetings are held every fortnight at the house of one of the members, the oldest present at the opening being chairman. Each member is called upon for the statement of cases, either as remarkable or for consultation and advice. So freely are cases stated, that where there has been error in treatment, no hesitation is felt in mentioning it for the instruction of others. Candor prevails in the discussion of all topics, which is conducted with that confidence and kindness which assures to the youngest not reproof but encouragement; and offence rarely occurs. There is then usually discussed a subject previously selected; or occasionally each member, in turn, reads a dissertation, which elicits further discussion. Contract is made by the Association for attendance at the Alms House on the poor of the town, and the time apportioned by lot. The bill of mortality of the town, with the causes of decease, is also here made out. But few cases of discipline are upon the records, and they occurred at an early date. It is the duty of each member to record any deviation from the code of medical ethics which may come under his cognizance. Cases of this kind have been few, and in all instances they have been harmoniously and readily adjusted; and if misunderstanding has occurred, it has been soon obliterated.

Well were it for our professional honor, and the public interests, could equal harmony, good understanding and desire of mutual benefit, everywhere prevail among medical men.

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BOSTON, FEBRUARY 6, 1839.

MEDICAL SCHOOL OF THE UNIVERSITY OF NEW YORK.

The following professors of the Medical Department of the University of the city of New York, have resigned their respective trusts: Martyn Paine, M.D., Professor of the Theory and Practice of Medicine;

Charles A. Lee, M.D., Professor of Materia Medica, Pharmacy and Medical Jurisprudence; Gunning S. Bedford, M.D., Professor of Obstetrics, and the Diseases of Women and Children; Alfred C. Post, M.D., Adjunct Professor of Anatomy; A. Sidney Doane, M.D., Professor of Physiology; J. C. Beales, M.D., Professor of Operative Surgery and Surgical Anatomy; Caleb Ticknor, M.D., Professor of Hygiene; John Watson, M.D., Professor of Clinical Surgery; J. Augus McVickar, M.D., Professor of Clinical Midwifery; James A. Washington, M.D., Professor of Clinical Medicine.

We are almost out of patience in trying to keep pace with the appointments and resignations in this intended mammoth of learning. Only three weeks ago we published a flattering account of the prospects of the medical department, from a correspondent, in which the unction of praise was liberally bestowed upon the above defunct faculty—and we still feel that they were and are individually entitled to high consideration as men, and teachers of their profession. But here they are again, thrown into the ranks from whence they were taken—and so the University must go to work and elaborate another batch of ordinary and extraordinary professors. About all the Council has ever done, since the first day of its organization, has been to make and unmake faculties.

Just as the foregoing remarks were written, we were favored with the following exposition of facts from the Medical Examiner, and therefore introduce it without further apology.

"The cause of this simultaneous resignation will be learned from the following statement: The University is greatly in debt, and the Council wished to make of the Medical School a sort of sinking fund. The first demand they made, was that the Medical Faculty should raise $25,000 on account of the University. This the latter at once refused. It was then agreed that the faculty should pay $2,000 a year for certain rooms in the University building, the Council to make the necessary alterations. This agreement was subsequently so modified that the Faculty themselves were to make the alterations, and have the rooms for four years at the rate of $1,500 a year.

"Everything seemed satisfactorily arranged, when lo! the Council passed a resolution that for every pupil in attendance above a hundred, the Medical Faculty should pay as rent $12 a year extra, and that all matriculation and graduation fees should be paid to the University fund and not to the Medical Faculty. So that on the supposition of there being 200 pupils in attendance, the University would have received from the College—

For rent,	$2,000
For students above one hundred,	1,200
For matriculation fees,	1,000
For graduation fees, supposing all to graduate who matriculated,	2,500
Total,	$6,700

"And this without being at the slightest outlay, or running the slightest risk.

"On learning this demand, the professors immediately sent in their resignations, which were not given in to the Council, however, the professors being privately assured that that body would not persist in its demand. But the Council, on meeting, determined not to recede, on which

the professors simultaneously and unanimously resigned, for doing which they deserve and will receive the thanks of the profession.

"We must, notwithstanding this, have a good and efficient medical school in this our city, and we would respectfully suggest to the Trustees of the Columbia College, whether this be not the appointed time for giving effect to that part of their charter which confers on them the right to grant medical diplomas. Their funds are most ample, and no time could be more favorable to success. We hope they will not allow it to pass unimproved.

Medical Missionary Society of China.—In giving a second notice of this admirably devised institution, we are desirous of circulating the intelligence far and wide, that philanthropically-disposed physicans of this country may have an opportunity of exercising their benevolence, either by transmitting such articles as would be acceptable in a hospital, or engaging themselves, personally, in the Christian labor of relieving the physical sufferings of the Chinese. As a people they place implicit confidence in the opinions and prescriptions of the European and American physicians, and as they alone are enabled to gain access to the higher classes of society, it is through them only that the principles of Christianity can successfully be introduced into that immense empire of three hundred and sixty millions of souls.

As all those who practise under the auspices of the Society neither ask nor receive compensation for their services, the impression made on the minds of the multitude of applicants for medical advice, is of the most favorable character. No plan of intercourse with that singular race of exclusives has ever been devised, which promises so well for the future, as the introduction of upright, skilful surgeons and physicians. It is not impossible but that through their agency, within fifty years, the old barriers of prejudice against foreigners will be wholly broken down; and China, when once open to the free ingress of civilized man, may yet be distinguished for her advancement in science and in practical Christianity.

As opportunity occurs we shall continue the republication of extraordinary surgical cases from the printed reports of the Ophthalmic Hospital, which were published at Canton, as the surest method of showing to the reader the wisdom of the original founders of the hospital, in undertaking the Herculean task of building up an extensive charity in a country where selfishness is the predominant characteristic of the nation. Should any gentleman feel desirous of offering himself to the directors as an operator—and many are wanted—he would be furnished with all the letters and necessary documents, on making application at this office.

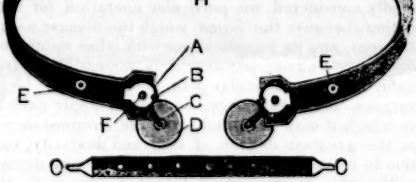
Dr. Parsons's Prize Dissertations.—Messrs. Little & Brown have published a remarkably neat volume of 248 octavo pages, entitled "Boylston Prize Dissertations," on, 1st, *Inflammation of the Periosteum;* 2d, *Eneuresis Irritata;* 3d, *Cutaneous Diseases;* 4th, *Cancer of the Breast;* also, *Remarks on Malaria,* by Usher Parsons, M.D., &c., of Providence, now President of the Medical Society of Rhode Island. The profession will be gratified with the respectable shape given to these important papers. Dr. Parsons is so well known in the annals of medical literature, that it is almost needless to present the permanent claims

of the work to a place in the libraries of all our New-England practitioners. Had not large drafts, for the Journal, been made already upon several of the essays constituting a good portion of the book, we should have presumed to extract pretty liberally. As it is, we strongly recommend the author's writings to the favor of physicians everywhere, and may ourselves, hereafter, venture to take an occasional page on account of its intrinsic merit.

Dr. Knight's Lecture.—We have received the introductory lecture to the present course of medical lectures in Yale College, by J. Knight, M.D., Professor of the Principles and Practice of Surgery. As Dr. Knight is no stranger to the public, it is unnecessary to say more, at present, than that he has given an interesting historical sketch of the medical school of New Haven, with biographical notices of the eminent men who have been connected with it. It being our intention, soon, to devote a page or two to that school, it will afford an opportunity for giving the reader a further notice of this discourse.

Dr. Reese's Lecture.—There is barely space to acknowledge the reception of this beautifully printed pamphlet of 38 pages, being an *Introductory Lecture* delivered at the opening of the Albany Medical College, January 2, 1839, by David M. Reese, M.D., Professor of Theory and Practice of Physic, &c.—published by the request of the class.

Dr. Fletcher's Double Truss.—The cut below is like the one previously given, with the exception of the covering, which will require but little explanation.



A, the rotary wheel on the under side. B, a small screw by which the rotary wheel is made fast. C, a short steel spring connecting the pad to the rotary wheel. D, the pad, which is convex on the under side. E, a brass nut, holding the brass, the spring, and covering together. F, a screw, by means of which the pressure upon the pad is increased. H, a cushion or soft pad about six inches in length; this covers the space between the ends of the covering, and allows the spring to be lengthened from one inch to five inches, as may be requisite. It serves the place of two small pads, which are often put on to relieve the pressure over the prominence on the sacrum. This is fastened by several small

hooks and eyes on the back side, making a neat finish, and occupying little space. O, the loops on the ends of the strap, which are put on to the brass nuts at E. In the centre of this strap is a small stud, by which the strap may be taken up or let out, in order to fit the wearer; and when the instrument is to be removed, take off one loop.

Medical Society of Missouri.—The Medical Society of Missouri was incorporated January 25th, 1837. The meetings of the Society are known and designated as annual, regular and special. Its officers are a President, Vice President, Treasurer, a Recording Secretary, and a Corresponding Secretary—there are also two Standing Committees, to wit, a Committee on Elections, and a Committee on Publications. The officers elected for the year one thousand eight hundred and thirty-eight were, *President*, Dr. Hardage Lane; *Vice President*, Dr. George Engelmann; *Treasurer*, Dr. E. H. McCabe; *Recording Secretary*, Dr. ——; *Corresponding Secretary*, Dr. B. B. Brown. The annual meetings of the Society are held on the day of the regular meeting in January. The regular meetings are held on the first Friday of every month. A special meeting may be convened at any time by the President, or by five senior members, provided due notice thereof shall have been previously given.

Mortality in the West Indies.—A report from a British medical officer, attached to the army, has been lately published in England, and has elicited some startling facts relative to the mortality of the troops stationed in the West India Islands. By this report it appears that in 30 years, more than 30,000 soldiers have perished by the yellow fever and other epidemics peculiar to these islands. Consequently, in this short space of time more than four times the whole force has been cut off by disease alone, and the average duration of every soldier's life has been only seven years and a half.

On some objections made to the performance of Extraction in Cataract.—1st. Abstractedly considered, no *particular* operation for cataract is superior to another, because the forms which the disease assumes are so essentially different, and its complications with other ophthalmic and constitutional affections so numerous, that it is impossible to treat successfully all cases by any one particular plan.

2d. The surgeon must, therefore, be able to apply each operation to those cases to which it may be suited; and the circumstance that extraction requires the greatest degree of skill and dexterity, cannot form a valid objection to its performance, where the case may demand it.

3d. When the case is one which leaves a choice to the surgeon, whether he shall perform reclination or extraction, the latter is to be preferred, because no objection to its performance is valid.

4th. It is absolutely necessary, for the success of the operation in question, that the patient's constitution be sound, his general health good, and the eye, with the exception of the simple structural and functional alterations attendant on cataract, perfectly healthy.

Important to Druggists.—M. Dubail presented the Secretary of Pharmacy, at Paris, during the session of 2d May, 1838, a specimen of opium

resembling the Smyrna, of which a considerable quantity has been circulated amongst the trade in Paris and Havre, and several cases of which have been seized, on the requisition of the School of Pharmacy.

This opium is wholly destitute of Morphia. It comes in lumps, plentifully covered with leaves; its section is blackish, and its consistence slightly elastic. It becomes milky on contact with water. Its aqueous and alcoholic solutions are neutre to test papers, and are not precipitated by ammonia. Its smell and taste, though more feeble, are analogous to those of common opium.

It has been so skilfully adulterated, that the characteristic hitherto considered as inimitable, that of agglutinated transparent tears, appears even on a section of mass; so that this sign, hitherto decisive as a test of the purity of opium, loses in this way all its value. This vile production appears to have been imported from England. M. Dubail, after enlarging on the dangerous consequences which similar falsifications may have in practice, calls for a committee to investigate the subject.—*Paris Journal of Pharmacy.*

Burdock in Impetigo. By Dr. Graves.—I had recently under my care a young man who suffered greatly from an impetiginous affection, accompanied by varicose veins of the legs; the tibial surfaces of both were covered with ulcers, from which a considerable quantity of purulent and ichorous fluid exuded; and as his business obliged him to walk about constantly, he suffered a great deal of distress and annoyance. I treated him, at first, with leeches and poultices, and afterwards with various astringent applications, but with very little relief; the discharge from the legs was profuse, and the heat, itching and soreness undiminished. While in this state, he was advised by a friend to take about four or five ounces of burdock root (Arctium Lappa), and having boiled it in a quart of water down to a pint, to drink this quantity of decoction every day in divided doses. He did so, and in the space of three or four days a most remarkable improvement took place. Thinking that the benefit derived might be the result of accident, I made him leave off the burdock for a few days, and found that the legs began to get bad again. He resumed the use of it, and is now well. I do not wish to attach more interest to this case than it deserves; but certainly, the decoction of the burdock operated in a very remarkable manner in improving this gentleman's health, checking the tendency to impetiginous inflammation, and arresting the profuse discharge. Here is a specimen of the root itself; although it is not at present mentioned in our pharmcopœia, it held a place at one time in the materia medica, and enjoyed considerable reputation as an alterative remedy.—*Lon. Med. Gaz.*

Medical Miscellany.—Dr. S. Cutter, late Health Commissioner, is declared to be a public defaulter in that department.—A meeting of the Counsellors of the State Medical Society will be held at the Athenæum this day, at 11 o'clock, A. M.—Dr. Ticknor's lectures before the Stuyvesant Institute, New York, on the *consideration of the popular objections to phrenological science*, gave great satisfaction to an audience capable of appreciating the doctor's talents.—A case of poisoning, by eating fresh pork, is related in the last No. of the Philadelphia Examiner. It took place in Carrolton, Illinois.

To Correspondents.—The communication of Dr. Howard was received too late for this No. A notice of Dr. Howe's new surgical apparatus has been crowded from our pages this week.

Died,—At Portsmouth, N. H., Dr. James H. Pierrepont, 71.

Whole number of deaths in Boston for the week ending Feb. 2, 27. Males, 16—females, 11.
Of consumption, 4—rheumatism, 1—dropsy on the brain, 2—disease of the heart, 2—dropsy, 1—drowned, 1—disease of the spine, 1—cholera infantum, 1—inflammation of the lungs, 1—intemperance, 1—scarlet fever, 4—sudden, 1—child-bed, 1—old age, 1—dropsy in the head, 1—palsy, 1.

BROWN'S PATENT SELF-INJECTING APPARATUS.

The undersigned respectfully calls the attention of medical practitioners to a newly-invented instrument, which is for sale at his store, No. 481 Washington street, corner of Elliot street. If physicians would examine the principles of its construction, they would appreciate its usefulness, and would probably be induced to recommend it very generally in their practice. Physicians, druggists, and the inhabitants of Boston, are particularly invited to look into the superiority of this article over the inventor's former instrument, as it now has the advantage of Goodyear's new India Rubber, which is allowed by all to be an entirely different article from that formerly manufactured.

Feb. 6—eoply WILLIAM BROWN.

MEDICAL SCHOOL OF MAINE.

The Medical Lectures at Bowdoin College will commence on Monday, the 18th day of February, 1839.

Anatomy and Surgery, by Joseph Roby, M.D., of Boston.
Theory and Practice of Physic, Obstetrics, and Medical Jurisprudence, by James McKeen, M.D.
Chemistry and Materia Medica, by Parker Cleaveland, M.D.

The Anatomical Cabinet and the Library are annually increasing.

Every person becoming a member of this Institution, is required previously to present satisfactory evidence of possessing a good moral character.

The amount of fees for the lectures is $50, payable in advance. The lectures continue three months.

Degrees are conferred at the close of the Lecture Term in May, and at the following Commencement of the College in September.

P. CLEAVELAND, *Secretary.*

Brunswick, Me., October, 1838. D. 5—eop6t

SCHOOL FOR MEDICAL INSTRUCTION.

The Subscribers propose establishing a private Medical School, to go into operation the first of September next. The advantages of the Massachusetts General Hospital and other public institutions will be secured to the pupils; and every attainable facility will be afforded for anatomical pursuits.

Regular oral instructions and examinations in all the branches of the profession, will form a part of the plan intended to be pursued.

On the Practice of Medicine and Materia Medica, by	Dr. Bigelow.
On Anatomy and Surgery, by	Dr. Reynolds.
On Midwifery and Chemistry, by	Dr. Stoker.
On Physiology and Pathology, by	Dr. Holmes.

Dissections will be carried on throughout the year, and a course of Lectures on Practical Anatomy and Surgery will be given in the interval between the Medical Lectures of Harvard University.

A room will be provided in a central part of the city, with all the conveniences required by students.

JACOB BIGELOW,
EDWARD REYNOLDS,
Boston, August 17, 1838. D. HUMPHREYS STOKER,
Aug 29—eptm OLIVER W. HOLMES.

PRIVATE MEDICAL INSTRUCTION.

The subscribers are associated for the purpose of giving a complete course of medical instruction. Their pupils will have regular access to the medical and surgical practice of the Massachusetts General Hospital. They will be admitted, also, to the practice of the House of Correction, which constantly presents a large number of important cases, and whereopportunities will be afforded for acquiring a practical knowledge of compounding and dispensing medicines. They will be furnished with opportunities for the study of Practical Anatomy, not inferior to any in the country. To the pupils, particularly to those in the last year of their professional studies, facilities will be afforded for acquiring a personal acquaintance with private medical and obstetric practice. Instruction by examinations or lectures will be given in the different branches of medical studies, during the interval between the public lectures of the University. Books, and a room with fire and lights, will be furnished to the students at the expense of the instructers.

GEORGE C. SHATTUCK,
WALTER CHANNING,
JOHN WARE,
Oct 31—eptf GEORGE W. OTIS, Jr.
WINSLOW LEWIS, Jr.

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